APPLICATION DATA SHEET Application Information Application Type:: **National Phase** Subject Matter:: Utility Suggested Classification:: Suggested Group Art Unit:: CD-ROM or CD-R?:: None Number of CD disks:: Number of copies of CDs:: Sequence submission?:: Computer Readable Form (CRF):: Number of copies of CRF:: Title:: Pyrrolidine Derivatives as Tryptase Inhibitors Attorney Docket Number:: 26539U Request for Early Publication?:: No Request for Non-Publication?:: No Suggest Drawing Figure:: 0 **Total Drawing Sheets::** No Small Entity?::

No

Latin name::

Variety denomination name::

Petition included?::

Petition Type::

Licensed U.S. Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: DE

Page # 1 Initial 1/25/2005

Status:: **Full Capacity** Given Name:: **Thomas**

Middle Name::

Family Name:: **MARTIN**

Name Suffix:::

City of Residence:: Konstanz

State or Province of Residence::

Country of Residence:: DE

Street of Mailing address:: St.-Martins-Weg 13

City of mailing address:: Konstanz

State or Province of mailing address::

Country of mailing address:: DE

Postal or Zip Code of mailing address:: 78462

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: DE

Full Capacity Status:: Given Name:: Wolf-Rüdiger

Middle Name::

Family Name:: **ULRICH**

Name Suffix:::

City of Residence::

State or Province of Residence::

DE Country of Residence::

Street of Mailing address:: Alpenstr. 2

Konstanz City of mailing address::

State or Province of mailing address::

Country of mailing address:: DE

Postal or Zip Code of mailing address:: 78464

Correspondence li	nformation					
Correspondence Cu Number::	ustomer 03-	4375				
Name::	Ga	Gary M. Nath				
Street of mailing ad	dress:: 103	1030 Fifteenth Street, N.W.				
	Si	xth Floor				
City of mailing addre	ess:: Wa	Washington				
State or Province of	mailing address:: DC	DC				
Country of mailing a	ddress:: US	US				
Postal or Zip Code	of mailing address:: 200	005				
Phone number::	(20	(202) 775-8383				
Fax number::	(20	(202) 775-8396				
E-Mail address::	ip@	ip@nathlaw.com				
Representative Info	ormation					
Representative Co	ustomer Number::	034375				
Domestic Priority I	nformation					
Application::	Continuity Type::	Pare	nt	Parent Filing		
		Appl	ication::	Date::		

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
EP	02016683.1	26 July 2002 (26.07.2002)	Yes

Assignee Information

Assignee name::

Altana Pharma AG

Street of mailing address::

Byk-Gulden-Str. 2

City of mailing address::

Konstanz

State or Province of mailing address::

Country of mailing address::

DE

Postal or Zip Code of mailing address:: 78467